FOR OFFICIAL USE ONLY: PROCUREMENT SENSITIVE UNTIL TENTATIVE COST COMPARISON DECISION

Quality Control Plan

Keesler Air Force Base
Little BOS MEO

Prepared by:

Abacus Technology Corporation

September 2003

Table of Contents

1. REVISION HISTORY

REVISION HISTORY			
Revision	**Description of Change**	**Author**	**Effective Date**
0	Initial release	MEO Team	9/01/03

Revisions to the Quality Control Plan (QCP) are indicated with an asterisk (*).

2. INTRODUCTION

Note, throughout this QCP, various references are made to the Performance Requirements Document (PRD). The PRD is the contractual agreement entered into by MEO to provide services to the government. This document specifies the work to be performed, the standards of performance, and the work instructions and procedures to be followed.

****

In order for the Keesler Air Force Base Little BOS MEO (i.e., "the MEO") to maintain its position as a premier supplier of base support services, it is essential that we consistently meet or exceed the requirements and expectations of our customers for the quality, performance, timeliness, and cost of the products and services we provide.

This manual defines the MEO quality control procedures and management system to meet the requirements of the performance management evaluation criteria set forth in RFP F41689-02-R-0049, specifically those delineated in the Performance Management Plan (PMP). Implementation of these practices ensures the MEO will consistently meet the quality and performance requirements of customers in a timely and cost-effective manner.

This QCP is subject to amendment as a result of changes to working practices and is reviewed periodically for accuracy. Requests for revision shall be written and submitted to the MEO Chief. Administration and approval of the QCP is the responsibility of the MEO Chief.

The QCP is controlled by manual number and distributed to a designated distribution list. Manuals without a controlled manual number are considered uncontrolled.

3. QUALITY POLICY

QUALITY POLICY

The MEO will provide world-class base Information Technology support services and products that meet or exceed the requirements of our internal and external customers. To ensure the goals of this policy are met, the MEO does the following:

- Partners and communicates with customers to ensure requirements are mutually conveyed and clearly understood
- Proactively strives to exceed customer requirements
- Implements procedures and policies designed to improve quality and performance within the MEO organization
- Trains all employees on quality policies and customer requirements
- Implements corrective and preventive actions and monitors quality improvements for effectiveness
- Creates and fosters an attitude of continuous improvement among its supervisors and workers and maintains a safe and healthy work environment
- Performance Management in accordance with service levels expressed in the PRD

4. QUALITY ORGANIZATION

4.1. Scope

The scope of the Little BOS MEO quality system is:

To provide base level support services for information Technology functions outlined in the PRD and quality assurance oversight of MEO subcontracts. Such services and products include, but are not limited to, help desk, network operations, and base communication services.

4.2. Responsibilities

The MEO Chief has executive responsibility for the development and maintenance of the quality system, overseeing the day-to-day operations for the quality system, and interacting directly with the government on quality and performance management issues.

Primary responsibility for implementing the quality system resides with the functional area supervisors. The supervisors ensure that documented procedures define the specific responsibilities, authorities, and relationships of personnel who manage, perform, or verify work that affects quality.

General responsibilities for MEO personnel regarding work that affects quality are summarized in the following table:

Quality System Responsibilities

Who	Responsibility and Authority
MEO Chief	• Provides executive oversight of the quality system. • Directs implementation and monitors effectiveness of quality-related processes and activities. • Develops and implements effective external and internal communication pathways and systems through regular meetings with customers, supervisors, and MEO employees. • Establishes, defines, documents, and maintains quality policy. • Ensures the communication and understanding of established quality policy throughout the organization • Develops, implements, and maintains the QCP. • Ensures the quality system is established, implemented, and maintained. • Periodically audits the quality system for suitability and effectiveness. • Coordinates improvements to the quality system. • Approves and tracks corrective and preventive actions. • Reports progress against the defined quality standards. • Facilitates the management review meetings. • Maintains quality records.
Functional Area Supervisors	• Implement the QCP. • Communicate customer requirements to the appropriate personnel. • Ensure that qualified, skilled, and trained personnel and other resources are available to implement the quality system. • Ensure that services satisfy customer requirements including quality, safety, cost, schedule, performance, reliability, durability, accuracy, and maintainability. • Ensure that personnel comply with applicable standards, regulations, specifications, and documented procedures. • Conduct root cause analysis and propose corrective and preventive actions to eliminate nonconformances. • Collect, analyze, and report quality and performance management data. • Maintain quality records.
Quality Assurance Personnel (QA)	• Monitor MEO subcontractor performance. • Verify processes and work outputs. • Collect, analyze, and report quality and performance management data/metrics. • Report deficiencies to the MEO Chief and Contracting Officer.
All personnel	• Ensure the quality of their work. • Verify in conformance with the requirements of the quality system. • Empowered to stop work-in-progress or make appropriate notifications when unsafe conditions exist or requirements are not being met. • Originate corrective or preventive action requests.

5. QUALITY CONTROL PROCEDURES

5.1. General Requirements

In this QCP, the MEO addresses its quality objectives, management commitment to achieving these objectives, organizational goals, and the expectations and needs of MEO customers. Improvements to the quality system are made to enhance the achievement of MEO objectives in support of the government mission. The MEO implements periodic reviews of the quality system to determine the system's effectiveness and suitability. Results of these reviews are maintained as quality records.

The functional area supervisors identify the processes needed for the quality system, their sequence and interaction, the criteria for evaluating the performance of these processes, and the means to monitor them.

The MEO Chief implements actions necessary to achieve planned results and continual improvement and verifies the implementation and effectiveness of all processes within the MEO quality system.

5.2. Documentation

The MEO Chief ensures that quality is an integral part of the design, development, and delivery of MEO services and products. The MEO Chief emphasizes the use of problem detection, prevention, and correction in order to supply quality products and services to its customers.

Activities governed by the quality system are identified and documented. These documented procedures are controlled and effectively implemented to ensure that MEO products and services meet customer requirements.

Quality planning is embedded in the QCP and Work Instructions (PRD). Quality planning includes, as appropriate:

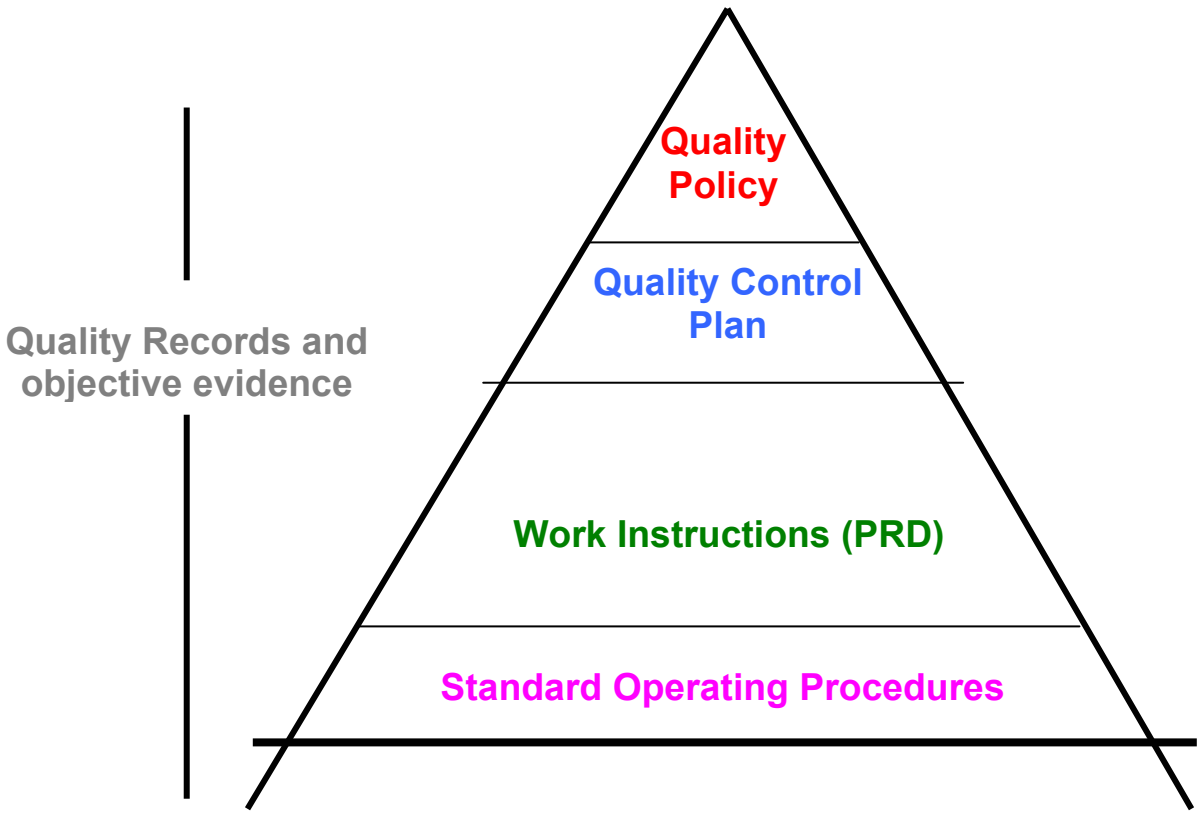
- Preparation of quality plans
- Identification and acquisition of controls, processes, equipment, resources, and skills needed to achieve the required quality

- Ensuring the compatibility of the design; the work process; installation, servicing, inspection, and test procedures; and applicable documentation
- Updating, as necessary, quality control inspection and testing techniques
- Identification of any measurement requirement involving a capability that exceeds industry standards (known state of the art).
- Identification of suitable verification at appropriate stages
- Identification and preparation of quality records

The documentation hierarchy for the MEO quality system is summarized in Figure 1, *Structure of Quality System Documentation*. The quality system is defined in the following controlled documents:

- The Quality Policy
- The Quality Control Plan
- Work Instructions (PRD)
- Standard Operating Procedures (SOPs)
- Quality Records

Figure 1: Structure of Quality System Documentation



The MEO Chief ensures that current quality system documentation and data are readily available to personnel. This ensures all quality system documentation and data is reviewed and approved prior to initial release and any subsequent modifications. Obsolete or invalid quality system documents and data are destroyed or, if retained for historical purposes, properly marked.

The government provides current work instructions as outlined in the PRD.

Functional area supervisors maintain the quality system documents and data for their areas.

At their work centers, MEO personnel have access to current and approved versions of quality system documents, quality system data, and external documentation pertinent to their work that

affects the quality of products and services.

5.3. Quality Records

The MEO maintains quality records as objective evidence that demonstrates conformance to the quality system and ensures its effective operation.

The MEO requires that quality records be:

- Identified, collected, indexed, accessed, filed, stored, maintained, and dispositioned according to documented procedures
- Retained for established retention times
- Legible
- Stored in an appropriate environment to prevent deterioration
- Readily retrievable
- Available to customers, as required.

The MEO Chief and functional area supervisors ensure quality records are identified in appropriate procedures, developed, and maintained in accordance with requirements.

5.4. Management Review

The MEO Chief provides evidence of his or her commitment to quality through the establishment and implementation of a quality system. Customer requirements, the quality policy, and quality objectives are communicated to all personnel.

The MEO Chief schedules, conducts, and facilitates regular internal MEO management reviews to assess the effectiveness of the system. At least one management review is accomplished each year.

In addition to the MEO Chief and functional area supervisors, government representatives from the Performance Management Office (PMO), Wing and Contracting Office are invited to attend the management review to share their thoughts and concerns on MEO performance.

The agenda, discussions, and results of management review meetings are documented as a quality record. A formal review report is prepared by the MEO Chief and distributed to the Contracting Office, Wing Commander, and meeting attendees.

In addition, the MEO Chief or designee attends external review meetings as outlined in the Performance Management Plan (PMP). These include the following:

Type	Purpose	Frequency
PMO Review Meeting (PMP 4.2)	Review and communicate expectations	1/week
Performance Management Council (PMP 4.3)	Presentation of MEO cost reduction actions and cost performance data	1/month

5.5. Process Control

Process Management

The MEO determines and manages the work environment needed to achieve product requirements. MEO personnel performing quality related work activities are competent based on experience, education, and/or training.

The government determines, provides, and maintains the necessary infrastructure to achieve conformity to product and service requirements. This infrastructure includes, as applicable, buildings and workspaces, utilities, process equipment (hardware and software), and supporting services.

The MEO Chief determines the requirements specified by customers and any statutory, regulatory, or other requirements necessary to meet customer needs. The MEO determines and implements effective arrangements to communicate product information, inquiries into subcontracts, and feedback (including complaints) to the customer.

Functional area supervisors verify the product or service to ensure it meets customer requirements. When applicable, validation is done before delivery or implementation of the product or service. Records of these validation activities are maintained.

The MEO plans and conducts production and service activities under controlled conditions. These include the following, as applicable

- Availability of information that describes product characteristics
- Availability of work instructions and standard operating procedures

- Use of suitable equipment
- Availability of measurement and monitoring devices and associated procedures
- Implementation of release, delivery, and servicing activities

Functional area supervisors ensure that monitoring and measurement equipment is properly used, calibrated, and maintained, and that equipment is used in a manner consistent with the required measurement capability.

Performance Reporting

On a regular basis, the MEO Chief reviews MEO performance to verify the specified performance standards are met. These reviews ensure the PRD requirements are well defined and documented and that differences between parties are resolved. Results of these reviews are maintained as quality records.

There are three parts to the monthly Performance Management Report: Quality Management Metrics, Little BOS Metrics Analysis, and Management Actions.

The Quality Management Metrics section includes the following:

- Number of valid customer complaints for the month
- Analysis of MEO performance against the PRD standards, tracking the most recent 12 months (when applicable) for trend identification
- Number of corrective and preventive actions for the month
- Number of open corrective and preventive actions that exceed their estimated closure dates
- Number of open corrective and preventive actions that exceed their initial response due dates established by the MEO Chief
- Number of Corrective/Preventive Action Request (CPAR) Forms (See Attachment 1) verified by internal audit, and number of CPARs added during verification of previously closed CPAR

The Little BOS Metrics Analysis section addresses the specific service provider requirements as outlined in PMP 4.6 and Exhibit 2. The general categories of the metrics are as follows:

- All-Services Requirements
- Communication & IT
- Multimedia

- Publication Management

The Management Actions section includes:

- Review of findings from internal audits and QAE inspections accomplished during the previous month
- Progress updates on corrective and preventive action implementations
- Discussion on process improvement ideas, including quality planning, action items and assignments
- Any issue that affects or potentially concerns MEO performance

The MEO uses the Microsoft Office Suite (Excel spreadsheets, Access databases, and Word reports) to collect, organize, analyze, and report performance data and metrics. The MEO utilizes existing data collection systems and augments these, as necessary. MEO performance data is readily available to the government Performance Manager.

Customer Satisfaction

The MEO Chief, in conjunction with the MEO functional area representatives, develops a survey instrument to assess customer satisfaction. In accordance with the PMP customer satisfaction will be measured using two methods: 1) general customer satisfaction measurement surveys and 2) point of service surveys where applicable. The survey form is validated by pretest administration and feedback to a select sample of the population and approved by the government PMO. The instrument uses a Likert scale system with at least six gradations for every attribute to be measured.

Customer satisfaction is assessed periodically according to the MEO Customer Satisfaction Measurement Plan and reported to the PMO. Completed surveys are audited for validity by an independent agency or government entity.

5.6. Corrective and Preventive Action

The MEO emphasizes the use of problem prevention or correction to determine the potential or actual ("root") cause of nonconformances, nonconforming products or processes) to prevent their occurrence or recurrence. Any MEO worker may initiate corrective or preventive action requests.

Corrective action is taken to eliminate potential or existing nonconformances to a degree appropriate to the magnitude of the problems and commensurate with the risks encountered to

eliminate or minimize the impact on safety, performance, dependability, processing cost, quality-related cost, and customer satisfaction.

Corrective actions shall be documented using the CPAR form and processed electronically or via hard copy in accordance with this document. Corrective actions shall be initiated as a result of, but not limited to, the following:

- Non-conformances identified during audits
- Action items from management reviews of the quality system
- Process or product problems identified by employees
- Review of trends or significant discrepancies discovered by analysis

Preventive actions shall be documented using the CPAR form and processed electronically or via hard copy in accordance with this document. Preventive actions shall be determined from the analysis of appropriate data to detect trends and identify causes that may result in future nonconformances. Data sources may include, but are not limited to, the following:

- Equipment operation logs and process charts
- Performance records
- Internal audit reports
- Corrective or preventive action data
- Internal audit reports
- Corrective or preventive action data
- Concessions (waivers/deviations), service reports, and customer comments

Process

A CPAR can be processed using either an electronic or a hard copy version of the CPAR form. All fields must be filled out for the form to be complete. The responsible manager keeps a hard copy of each completed form as a quality record.

1. The CPAR originator shall complete items 3, 4, 5, 6, and 11 of the CPAR form.

    a. If the nonconformance or observation did not occur during an audit, the originator completes items 8, 9, 10 by noting "N/A" – Not Applicable

b. If the nonconformance or observation occurred during an audit, the auditor completes items 8, 9, 10 (otherwise "N/A" – Not Applicable)

2. Responsible Manager (RM) completes items 1 (obtaining the number from the MEO Chief), 2, 12, 13, and 14 and forwards the form to the Responsible Function (RF).

3. The RF investigates the non-conformances, completes items 15, 16, 17A, and returns the form to the RM. The RM sends it to the MEO Chief within five working days of receipt. The MEO Chief approves and signs 17B, retains a copy for tracking, and returns original to the RM for further action.

a. If no further action is necessary, the RM notes "N/A" in 18, completes 19A and 19B, and returns the form to the MEO Chief. If the MEO Chief agrees, Step 4 below is completed. If the MEO Chief disagrees, provide further explanation on the need for a corrective/preventive actions and return to the RM for further action.

b. If corrective/preventive actions will be implemented, the RM forwards to the RF who completes 18 and forwards it to the RM after all corrective/preventive actions have been completed. The RM completes 19A and 19B and returns the form to the MEO Chief.

4. The MEO Chief completes 20A and 20B, sends a copy to the RM within five working days of receipt, and retains the original until verification actions are completed.

5. Verification for implementation and effectiveness: the MEO Chief passes the CPAR form to the Audit Team prior to the scheduled audit of the RF. The Audit Team completes items 21 through 25 and returns the form to the MEO Chief.

6. The MEO Chief sends a copy of the completed form to the RM and retains the original as a quality record for a minimum of five years. CPARs are tracked by the unique number assigned by the MEO Chief.

5.7. Internal Quality Auditing

The MEO conducts internal quality audits at planned intervals to determine the status and effectiveness of the quality system. Internal audit results are documented and brought to the attention of the functional area supervisor of the audited area. The MEO Chief ensures audits are performed in accordance with the schedule and documented procedures.

The MEO Chief:

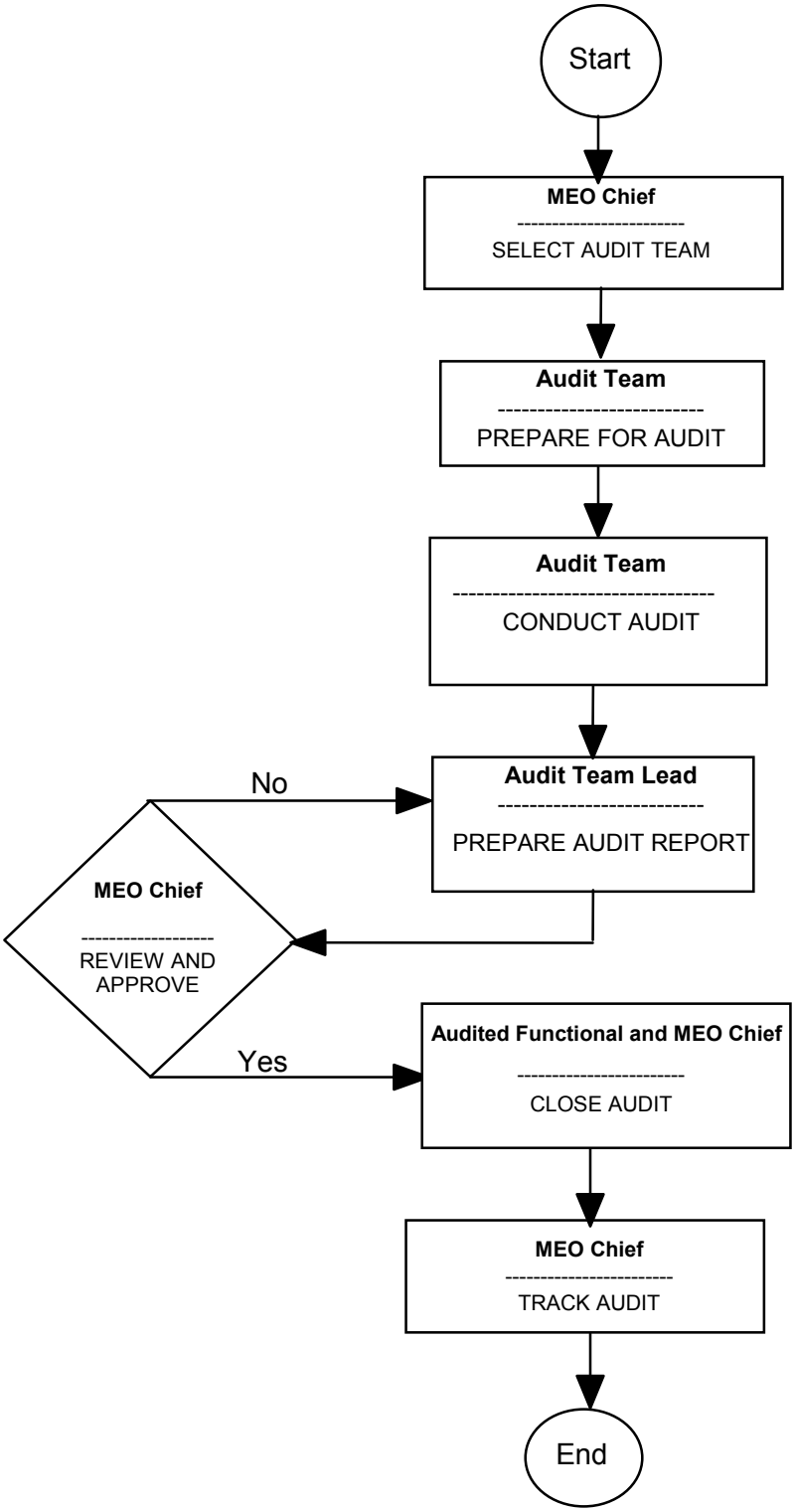
- Develops the annual audit schedule and subsequent changes to the schedule
- Periodically reviews the MEO quality system
- Reconciles any disagreements between the auditor and audited functions
- Ensures internal quality audits are performed in accordance with the approved audit schedule
- Appoints an Audit Team

The Audit Team:

- Plans and conducts audits
- Collects objective evidence to support findings and CPAR verifications
- Records findings
- Ensures patterns of observations across audits are looked for and combined into nonconformances
- Prepares and distributes audit reports

The following flowchart (Figure 2) outlines the MEO internal quality auditing process.

Figure 2: MEO Internal Audit Process



Audit Procedure

Planning

The MEO Chief ensures the MEO internal quality audit schedule is developed. The audit schedule identifies the Audit Team members and addresses all applicable elements of the quality system during each 12-month period.

Preparation for Audit

The Audit Team Lead prepares an audit agenda that indicates specific audit dates, times, and team assignments and reviews previous audit reports, notes, and corrective/ preventive action requests (CPARs).

Conduct Audit

The Audit Team Lead conducts the opening, wrap-up, and closing meetings with the Responsible Manager or designee of the organization.

The Audit Team interviews appropriate personnel to determine whether actual practices conform to the requirements of the documented policies, plans, procedures, and work instructions. The team verifies the effectiveness of CPAR closed since the last audit and completes the verification sections of the CPAR forms.

At the conclusion of the audit, the Audit Team reviews and validates findings with the Functional Area Supervisor.

Audits of Closed CPARs Only

When deemed necessary, because of the nature, risk, scope, or prevalence of problems documented by corrective actions, the MEO Chief may schedule an audit to verify closed CPARs. During these audits, the auditor need only obtain the CPAR forms to be verified from the responsible manager, audit the action taken for effectiveness, and complete the verification section of the CPAR form for the actions audited. If it is determined that additional action is required to correct the problem (resulting from the ineffectiveness of the original CPAR) a new CPAR is issued.

Preparing the Audit Report

The Audit Team:

- Categorizes findings into nonconformance(s) and observations
- Completes the originator section and the responsible function section of a CPAR form for all nonconformances
- In the event a corrective or preventive action taken since the last audit was ineffective, initiates a new CPAR. The new CPAR shall include the original CPAR number, the original finding, the original action specified, and a statement as to the reason why the corrective action is ineffective
- Writes observations to include the organization audited, the applicable requirement, the discrepancy, and the corrective action taken or proposed
- Maintains thorough audit notes and written observations as a quality record

The MEO Chief:

- Reviews the audit findings to ensure complete and adequate descriptions of the discrepancies are documented, and forwards the CPAR to the responsible manager
- Reviews any verified CPARs to ensure the verification is complete and adequate and that objective evidence is attached and forwarded to the responsible manager

The Audit Team Lead:

- Combines observations that show a pattern of similar nonconformances into a single nonconformance report
- Forwards all CPARs to the responsible manager
- Completes and provides the audit report to the MEO Chief for review and approval

Audit Report Review and Approval

The MEO Chief reviews the audit report to ensure it is complete, concise, consistent, and unambiguous, and that all nonconformances and/or observations are factual and traceable to the relevant requirement

Closure

- The MEO Chief distributes the audit report to the audited organization's manager (i.e., Functional Area Supervisor) or designee within two weeks of the last day of the audit
- The responsible manager signs the audit report acknowledging receipt
- The MEO Chief retains the audit report and objective evidence

- The responsible manager shall ensure that CPARs issued are responded to in a timely manner in accordance with initial response due dates established by the MEO Chief

Tracking

The MEO Chief assigns a unique number to each audit and maintains an audit-tracking log.

6. DEFINITIONS

Audit Report	Summary of audit scope and findings
Customer	Any component of the government that enters into a contractual agreement with MEO for delivery of products or services.
Customer Agreement	Any PRD tasking or other legal commitment (e.g., Inter-Services Support Agreement (ISSA), Memorandums of Agreement (MOA), or Memorandums of Understanding (MOU)) entered into by the MEO to deliver a product or service.
Government	The principal MEO customer. Any component of AETC or Keesler AFB that receives MEO services or has oversight of MEO responsibilities.
Nonconformance	Non-fulfillment of a specific requirement
Objective Evidence	Information which can be proven true based on facts obtained through observation, measurement, test, or other means
Observation	Isolated non-fulfillment of a specific requirement that can be corrected on the spot (e.g., typo, missing word, one missing signature from a sample of objective evidence, etc.)
Performance Management Plan	The government adopted management system to facilitate communication, continuous improvement, and partnership with the service provider. Also known as the PMP. This document is consistent with the requirements of AFI 63-124.
Performance Requirements Document	The government furnished contractual document that establishes the work, levels of performance, and quality requirements that must be met by the supplier. Also known as the PRD.
Product	Any systems, hardware, software, data, or service resulting from MEO activities or processes.
Quality Policy	Overall intentions and directions of MEO with regard to quality as formally expressed by the MEO Chief.
Quality Record	Record required by the QCP or work procedures to serve as objective evidence that requirements were met.
Quality System	MEO organizational structure, procedures, processes, and

	resources needed to implement quality management.
Responsible Function	The functional area or workcenter responsible for the specified work process or output.
Responsible Manager	Person having the responsibility and authority to accomplish/implement a specific activity or process (includes functional area supervisors, work leaders, and designees).
Service	The outputs from MEO activities. These include management, maintenance, and customer service or assistance work activities.
Supplier	The organization (independent government entity or private contractor) that enters into a contract with the customer (government) to perform support services.

Attachment 1– Corrective/Preventive Action Request Form

Keesler AFB MEO	**CORRECTIVE/PREVENTIVE ACTION REQUEST**	1. CPAR No. _____ 2. DATE _____

PART 1 – ORIGINATOR

3. ORIGINATOR _____	4. ORG _____	5. PHONE _____	6. E-MAIL _____

7. ☐ If Nonconformance is existing, check for Corrective Action ☐ If Nonconformance is potential, check for Preventive Action ☐ Audit Nonconformance - Report No._____	8. AUDITEE _____	9. POINT OF CONTACT (guide) _____

10. REQUIREMENT
Document:_____
Revision Level:_____
Reference Paragraph:_____
Requirement:_____

11. DESCRIPTION OF DISCREPANCY (existing or potential)
Objective Evidence:_____

PART 2 – PROPOSED ACTION

12. RESPONSIBLE MANAGER _____	13. E-MAIL _____	14. PHONE _____	15. EST. CLOSURE DATE _____

16. ROOT CAUSE (or Analysis for Preventive Action)
_____

17A. PROPOSED CORRECTIVE/PREVENTIVE ACTION (if required)
_____

17B. QUALITY CONTROL OFFICE APPROVAL
_____

PART 3 – RESPONSE

18. ACTION PLAN
_____

PART 4 – CLOSE OUT

19A. RESPONSIBLE MANAGER CLOSE OUT SIGNATURE _____	19B. DATE _____
20A. QUALITY CONTROL OFFICE CONCURRENCE _____	20B. DATE _____

PART 5 – VERIFICATION

21. WAS ACTION TAKEN EFFECTIVE? ☐ Yes ☐ No	22. REASON	23. NEW CPAR No. (if necessary)
24. INTERNAL AUDITOR SIGNATURE		25. DATE